LOCAL TELEPHONE COMPANY

ANNUAL REPORT

OF THE

XO Communications Services, LLC

(Here show in full the exact corporate, firm or individual name of the respondent)

LOCATED AT 22001 Loudoun County Parkway Ashburn, VA 20147

(Here give the location, including street and number of the respondent's main business office within the State)

COMPANY # 2367

(Here give the APSC-assigned company number)

TO THE

ARKANSAS PUBLIC SERVICE COMMISSION



FOR THE YEAR ENDING DECEMBER 31, 2020

LETTER OF TRANSMITTAL

To:	Arkansas Public Service Commission Post Office Box 400 Little Rock, Arkansas 72203-0400
Cuba	
Subm	itted herewith is the annual report covering the operation of <u>XO Communications Services, LLC</u> (Company)
of)1 I	Loudoun County Parkway Ashburn, VA 20 for the year ending December 31, 2020. This report is submitted in
	dance with Section 51 of Act 324 of the 1935 Acts of Arkansas. ollowing report has been carefully examined by me, and I have executed the verification given below. (Signature)
	Government Relations Analyst (Title)

	VERIFICATION
STAT	E OF Virginia)) ss.
	NTY OF Loudoun) undersigned, Sharon Adams, Government Relations Analyst of the
	(Name and Title) XO Communications Services, LLC , on my oath do say that the following report has
	(Company)
careform affairs inform that a	prepared under my direction from the original books, papers, and records of said utility: that I have ally examined the same, and declare the same a complete and correct statement of the business and sof said utility in respect to each and every matter and thing set forth, to the best of my knowledge, nation, and belief; and I further say that no deductions were made before stating the gross revenues, and counts and figures contained in the foregoing statements embrace all of the financial transactions for eriod in this report.
ano po	(Signature)
day o	cribed and sworn to before me this f // Ard >02 mommission Expires 31 3024 NOTARY PUBLIC REG. #7512288 MY COMMISSION EXPIRES 12/31/2024 EXPIRES 12/31/2024

GENERAL INSTRUCTIONS, DEFINITIONS, ETC.

Two (2) copies of this report, properly filled out and verified shall be filed with the Utility Division of the Arkansas Public Service 1 Commission, Little Rock, Arkansas, on or before the 31st day of March following the close of the calendar year for which the report is made. 2 The word "respondent" in the following inquiries means the person, firm, association or company in whose behalf the report is made. 3 If any schedule does not apply to the respondent, such fact should be shown on the schedule by the words "not applicable." Except in cases where they are especially authorized, cancellations, arbitrary check marks, and the like must not be used either as 4 partial or entire answers to inquiries. Reports should be made out by means which result in a permanent record. The copy in all cases shall be made out in permanent black 5 ink or with permanent black typewriter ribbon. Entries of a contrary or opposite character (such as decreases reported in a column providing for both increases and decreases) should be shown in red ink or enclosed in parentheses. This report will be scanned in. Please bind with clips only. 6 Answers to inquiries contained in the following forms must be complete. No answer will be accepted as satisfactory which attempts by 7 reference to any paper, document, or return of previous years or other reports, other than the present report, to make the paper or document or portion thereof thus referred to a part of the answer without setting it out. Each report must be complete within itself. In cases where the schedules provided in this report do not contain sufficient space or the information called for, or if it is otherwise 8 necessary or desirable, additional statements or schedules may be inserted for the purpose of further explanation of accounts or schedules. They should be legibly made on paper of durable quality and should conform with this form in size of page and width of margin. This also applies to all special or unusual entries not provided for in this form. Where information called for herein is not given, state fully the reason for its omission. 9 Schedules supporting the revenue accounts and furnishing statistics should be so arranged as to effect a division in the operations as to those inside and outside the state. Answers to all inquiries may be in even dollar figures, with cents omitted and with agreeing totals. 10

Each respondent should make its report in duplicate, retaining one copy for its files for reference, in case correspondence with regard to

such report becomes necessary. For this reason, several copies of the accompanying forms are sent to each utility company

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Give the name, title, office address, telephone number and e-mail address of the person to whom any correspondence concerning this report should be addressed:				
Name Kelly Faul	Title Sr. Mgr, Government Relations			
Address 1300 I Street, NW Washington, DC	20005			
Telephone Number 202-920-5329				
E-Mail <u>kelly.faul@verizon.com</u>				
Give the name, address, telephone number and e-mail address of the resident agent:				
Name The Corporation Trust Company Telephone Number 302-658-7581				
Address 1209 Orange Street Wilmington, DE 19801				
E-Mail				

IDENTITY OF RESPONDENT

۱.	Give the exact name by which respondent was known in law at the close of the year. Use the initial word "The" only when it is part of the name:				
	XO Communications Services, LLC				
2.	Give the location (including street and number) of (a) the main Arkansas business office of respondent at the close of the year, and (b) if respondent is a foreign corporation, the main business office if not in this state:				
	(a) (b) 22001 Loudoun County Parkway Ashburn, VA 20147				
3.	Indicate by an \mathbf{x} in the proper space (a) the type of service rendered, and (b) the type of organization under which respondent was operating at the end of the year.				
	(a) () Electric, () Gas, () Water, (X) Telephone, () Other				
	(b) () Proprietorship, () Partnership, () Joint Stock Association,() Corporation, (X) Other (describe below): LLC				
1.	If respondent is not a corporation, give (a) date of organization, and (b) name of the proprietor or the names of all partners, and the extent of their respective interest at the close of the year.				
	(a) XOCS was coverted from a corporation to a limited liability company on September 13, 2011.				
	(b) XOCS is a indirect subsidiary of Verizon Communications, Inc.				
5.	If a corporation, indicate (a) in which state respondent is incorporated, (b) date of incorporation, and (c) designation of the general law under which respondent was incorporated, or, if under special charter, the date of passage of the act:				
	(a)				
	(b)				
	(c)				
6.	State whether or not respondent during the year conducted any part of its business within the State of Arkansas under a name or names other than that shown in response to inquiry No. 1 above, and, if so, give full particulars:				
	N/A in 2020				

1.	eacl	h consolidation or merger, (b) name all constituent and merged companies, and (c) give like iculars as required of the respondent in inquiry No. 5 above:	
	(a)	N/A in 2020	
	(b)		
	(c)		
8.	date occa	te whether respondent is a reorganized company. If so, give (a) name of original corporation, (b) to of reorganization, (c) reference to the laws under which it was reorganized and (d) state the asion of the reorganization, whether because of foreclosure of mortgage or otherwise, giving full iculars.	
	(a)	N/A in 2020	
	(b)		
	(c)		
	(d)		
9.		s respondent subject to a receivership or other trust at any time during the year? o, state:	No
	(a)	Name of receiver or trustee:	
	(b)	Name of beneficiary or beneficiaries for whom trust was maintained:	
	(c)	Purpose of the trust:	
	(d)	Give (1) date of creation of receivership or other trust, and (2) date of acquisition of respondent: (1) (2)	
10.		the respondent act in any of the capacities listed in Paragraph (a) below during the tyear? No If so,	
	(a)	Indicate the applicable one by an X in the proper space:	
		() Guarantor,() Principalobligor to a surety contract,() Principalobligor to a guaranty contract.	
	(b)	Insert a statement showing the character, extent, and terms of the primary agreement or obligation, including (1) names of all parties involved, (2) extent of liability of respondent, whether contingent or actual, (3) extent of liabilities of the other parties, whether contingent or actual, and (4) security taken or offered by respondent.	

DIRECTORS

Give the name and office addresses of all directors at the close of the year, and dates of beginning and expiration of terms. Chairman (*) and Secretary (**) marked by asterisks.

Name of Director	Office Address	Date of Term		
Name of Director	Office Address	Beginning	End	
Raymond Wierzbicki	One Verizon Way Basking Ridge,NJ	2/1/17	Current	
John Townsend	One Verizon Way Basking Ridge,NJ		Current	

PRINCIPAL OFFICERS AND KEY MANAGEMENT PERSONNEL

Give the title of the principal officers, managers and key personnel, the names and office addresses of persons holding such positions at the close of the year.

Title	Name of person holding office at close of year	Office Address	
President & CEO	Raymond Wierzbicki	One Verizon Way Basking Ridge, NJ	
SVP, CFO	John Townsend	One Verizon Way Basking Ridge, NJ	
SVP, General Counsel, Secretary	John Frantz	One Verizon Way Basking Ridge, NJ	
SVP, Controller	Anthony Skiadas	One Verizon Way Basking Ridge, NJ	
Treasurer	Scott Krohn	One Verizon Way Basking Ridge, NJ	

GROSS ASSESSABLE REVENUES		
Description	Amount	
ARKANSAS GROSS ASSESSABLE REVENUES (excluding Interstate Tolls)	\$424,766	

LOCAL EXCHANGE SERVICE STATISTICS

ACCESS LINES	ARKANSAS
Residence	Zero
Business	Zero
TOTAL RESIDENTIAL & BUSINESS ACCESS LINES	
PBX Access Lines	
Coin or Credit Card Paystation Access Lines	
Company Official Access Lines (Numbers)	
TOTAL ACCESS LINES	Zero

STATEMENT OF ACCURACY

I do hereby state that the amounts contained in this report are true and accurate, schedules have been cross-referenced by use of the attached check list, and that the accuracy of all totals has been verified by me or under my supervision. Should I or anyone under my supervision become aware of any error in or omission from this report, I will take steps to notify the Arkansas Public Service Commission of such error or omission and provide corrected schedules as soon as possible.

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Sharon Adams, Government Relations Analyst

COMPANY CONTACTS

Company Information			
Company Name	Company Name XO Communications Services, LLC		
dba			
Official Mailing Address	22001 Loudoun County Parkway Ashburn, VA 20147		
Mailing Address for APSC Annual Assessment Invoice 22001 Loudoun County Parkway Ashburn, VA 20147			

AREA	PERSON TO CONTACT	PHONE #	FAX#	E-MAIL
Annual Report	Kelly Faul	202-920-5329		kelly.faul@verizon.com
APSC Annual Assessment	Sharon Adams	571-776-4574		sharon.e.adams@verizon.com
Tariffs	Daniel Ostroff	571-776-4548		daniel.g.ostroff@verizon.com
Property Taxes	Sharon Adams	571-776-4574		sharon.e.adams@verizon.com
Regulatory Affairs	Kelly Faul	202-920-5329		kelly.faul@verizon.com

Please list the number of utility employees located in Arkansas

None	
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